Załącznik do wniosku o świadczenie pieniężne za zapewnienie zakwaterowania i wyżywienia obywatelom Ukrainy przybywającym na terytorium Rzeczypospolitej Polskiej, w związku z działaniami wojennymi prowadzonymi na terytorium Ukrainy

**Karta osoby przyjętej do zakwaterowania**

# Imię i nazwisko\* PESEL lub w przypadku braku rodzaj oraz numer/seria dokumentu potwierdzającego tożsamość\*

**W poniższych polach zakreśl znakiem X dni, w których zapewniono zakwaterowanie i wyżywienie danej osobie\***

# Luty

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| 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10  | 11  | 12  | 13  | 14  | 15  | 16  | 17  | 18  | 19  | 20  | 21  | 22  | 23  | **24**  | **25**  | **26**  | **27**  | **28**  |
|  |  |  |  |  | *Brak możliwości wnioskowania o świadczenie za ten okres*  |  |  |  |  |  |  |  |  |  |

# Marzec

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# Kwiecień

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# Liczba dni łącznie\* Wypełnia Urząd – Liczba dni łącznie x dzienna wysokość świadczenia w zł

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# \* Pola oznaczone symbolem gwiazdki są wymagane